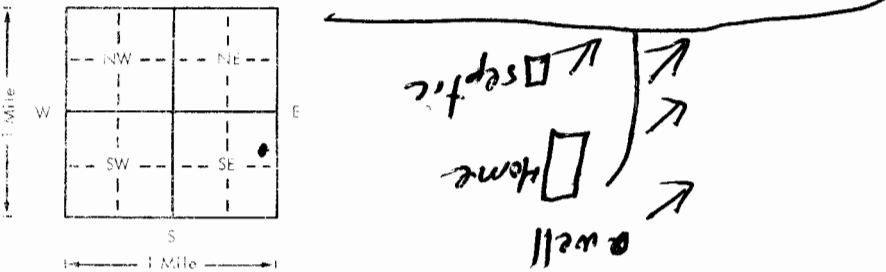


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

1. Location of well: County Leavenworth Fraction SE 1/4 NE 1/4 SE 1/4 Section number 24 Township number T 11 S S Range number R 20 E E/W	
2. Distance and direction from nearest town or city: 1 1/4 W of 25 Street address of well location if in city: 1/2 W of Tonganoxie	
3. Owner of well: Darrell Elliot R.R. or street: Rt 1 Box 1983 City, state, zip code: Tonganoxie Ks. 66686	
4. Locate with "X" in section below: Sketch map: 	
6. Bore hole dia. 6 1/4" Completion date 5/14-19 Well depth 265 ft.	
7. <input checked="" type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driver <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
9. Casing: Material P115 Height: <input checked="" type="checkbox"/> Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 36 in. RMP <input checked="" type="checkbox"/> P.C. <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 265 depth: Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth: Gauge No. 200	
10. Screen: Manufacturer's name Surfloc Type RMP Dia. 5" Slot/gauze 3/16 Length 140 Set between 125 ft. and 265 ft. ft. and <input type="checkbox"/> ft. Gravel pack? NO Size range of material: <input type="checkbox"/>	
11. Static water level: <input type="checkbox"/> no./day/yr. 11.5' ft. below land surface Date 5-14-79	
12. Pumping level below land surfaces: <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield 5 g.p.m.	
13. Water sample submitted: <input type="checkbox"/> no./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>	
14. Well head completion: <input type="checkbox"/> Pitless adapter 36 inches above grade	
15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 24 ft.	
16. Nearest source of possible contamination: fr. root Direction North Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
18. Elevation: 925 Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	
19. Remarks: owner to install slabs Casing type 200 to 200' 250 below 200'	
20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Robison Drilling 316 Business name Perry Ks License No. <input type="checkbox"/> Address Perry Ks Signed Jack Robison Date 5-11-79 Authorized representative	

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

SK 911